

JUN 25 2007

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Fax

To: Examiner Erick J. Rekstad**From:** John F. Vodopia**Fax:** (516) 273-8300**Pages:** 17 pages including cover sheet**Phone:****Date:** 6/25/2007

Re: U.S. Serial No: 10/690,403
Group Art Unit: 2621
Confirmation No: 5951
Docket No: 17137

CC:

AMENDMENT

• **Attached hereto:**

1. Certificate of Transmission by Facsimile
2. Amendment Transmittal Letter (in duplicate)
3. Amendment
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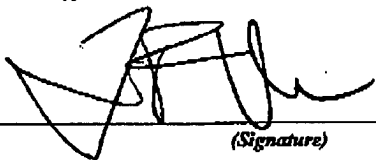
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SCULLY SCOTT

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P.02/17

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) Applicant(s): Hiroki Moriyama			Docket No. 17137
Application No. 10/690,403	Filing Date October 21, 2003	Examiner Erick J. Rekstad	Group Art Unit 2621
Invention: ENDOSCOPE SYSTEM Confirmation No.: 5951			
<p>I hereby certify that this <u>AMENDMENT</u> <i>(Identify type of correspondence)</i></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(571) 273-8300</u>)</p> <p>on <u>June 25, 2007</u> <i>(Date)</i></p> <div style="text-align: right; margin-top: 40px;"> <u>John F. Vodopia</u> <i>(Typed or Printed Name of Person Signing Certificate)</i>  <i>(Signature)</i> </div> <p style="text-align: center; margin-top: 40px;"> Note: Each paper must have its own certificate of mailing. </p>			

P18/REV02

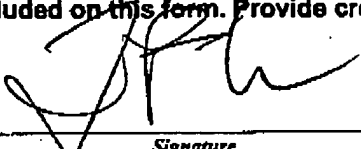
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JUN 25 2007

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P.03/17

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17137									
Applicant(s): Hiroki Moriyama														
Application No. 10/690,403	Filing Date October 21, 2003	Examiner Erick J. Rekstad	Customer No. 23389	Group Art Unit 2621	Confirmation No. 5951									
Invention: ENDOSCOPE SYSTEM														
COMMISSIONER FOR PATENTS:														
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.														
CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 _____ Signature			Dated: June 25, 2007											
John F. Vodopia Registration No. 36,299 SCULLY, SCOTT, MURPHY & PRESSER, P.C. 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td style="width:50%; text-align: center;">(Date)</td> <td style="width:50%;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
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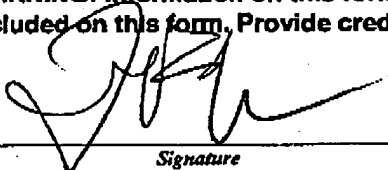
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JUN 25 2007

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P.04/17

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 17137									
Applicant(s): Hiroki Moriyama														
Application No. 10/690,403	Filing Date October 21, 2003	Examiner Erick J. Rekstad	Customer No. 23389	Group Art Unit 2621	Confirmation No. 5951									
Invention: ENDOSCOPE SYSTEM														
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CLAIMS AS AMENDED														
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE									
TOTAL CLAIMS	13 -	20 =	0	x \$50.00	\$0.00									
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00									
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00									
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00									
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 19-1013/SSMP . <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.														
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.														
 Signature			Dated: June 25, 2007											
John F. Vodopia Registration No. 36,299 SCULLY, SCOTT, MURPHY & PRESSER, P.C. 400 Garden City Plaza, Suite 300 Garden City, New York 11530 (516) 742-4343			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____</td> </tr> <tr> <td style="text-align: center;">(Date)</td> <td></td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>				I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____		(Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
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P11LARGE/REV10

JUN 25 2007

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**Applicant:** Hiroki Moriyama**Examiner:** Erick J. Rekstad**Serial No:** 10/690,403**Art Unit:** 2621**Filed:** October 21, 2003**Docket:** 17137**For:** ENDOSCOPE SYSTEM**Dated:** June 25, 2007**Confirmation No.:** 5951

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action mailed from the US Patent Office on March 26, 2007, applicant provides the following amendments and remarks.

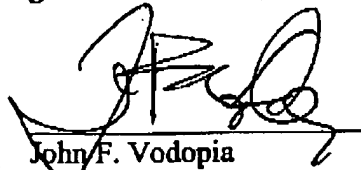
The "Listing of Claims" begins at page 2 of this paper.

The "Remarks" begin at page 6 of this paper.

CERTIFICATION OF FACSIMILE TRANSMISSION

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Dated: June 25, 2007


John F. Vodopia